

# P-166 Stigma and Obesity: Comparative Study Between Candidates to Obesity Surgery and Patients Already Submitted to this Treatment

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**Background** This study aims to compare stigma perception between candidates to obesity surgery and patients who were already submitted to surgical treatment.

**Methods** Two groups of patients were assessed:

- Group 1: 57 patients already submitted to obesity surgery, with a mean body mass index (BMI) of 36.20 (SD=7.34).
- Group 2: 34 patients, candidates to obesity surgery, with a mean BMI of 43.21 (SD=6.55).

There were no statistically significant differences between the two groups concerning age, gender, school level, disease duration and civil status. Nevertheless, Group 1 patients' present a lower body mass index than Group 2 patients'. Patients answered to the Stigma Scale in the context a personal interview.

**Results** Data analysis revealed that there are no statistically significant differences between the two groups of patients concerning stigma perception – to feel different from other people,  $t(88)=1.66$ ;  $p>.05$ ; to feel that, because of his/her condition, the others feel uneasy,  $t(88)=.76$ ;  $p>.05$ ; to feel the others avoid him/her because of his/her condition,  $t(88)=1.56$ ;  $p>.05$ ; to feel that his/her condition prejudices his/her relationship with friends,  $t(88)=.47$ ;  $p>.05$ . The single domain in which we have observed significant differences was to feel the others are afraid of him/her because of his/her condition,  $t(88)=2.27$ ;  $p>.05$ , perception that is higher in Group 2 patients'. Stigma perception showed not to be high in patients of both groups.

**Conclusions** Contrary to the common-sense idea, this study shows that stigma perception associated to obesity is not high in candidates to obesity surgery and in patients who were submitted to obesity surgical treatment.

# P-167 Well-Being, Ill-Being and Obesity Surgery: a Comparative Study of Candidates and Patients Already Submitted to this Treatment

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**Background** This study aims to compare well-being and ill-being (nervous system, muscular, respiratory and digestive symptoms) between candidates to obesity surgery and patients who were already submitted to surgical treatment.

**Methods** Two groups of patients were assessed:

- Group 1: 57 patients already submitted to obesity surgery, with a mean body mass index (BMI) of 36.20 (SD=7.34).
- Group 2: 34 patients, candidates to obesity surgery, with a mean BMI of 43.21 (SD=6.55).

There were no statistically significant differences between the two groups concerning age, gender, school level, disease duration and civil status.

Nevertheless, Group 1 patients' presented a lower body mass index than Group 2 patients'. Patients answered to the General Well-Being and to an Ill-Being Scale in the context a personal interview.

**Results** Data analysis suggested that there are no statistically significant differences between the two groups of patients concerning global ill-being,  $t(89)=1.97$ ;  $p>.05$ , nervous system symptoms,  $t(87)=1.47$ ;  $p>.05$ , and digestive symptoms,  $t(89)=.43$ ;  $p>.05$ . Nevertheless, patients who were already submitted to obesity surgical treatment report higher well-being,  $t(89)=3.80$ ;  $p>.05$ , and lower ill-being related to muscular,  $t(88)=2.12$ ;  $p>.05$ , and respiratory symptoms,  $t(89)=2.81$ ;  $p>.05$ . Moreover, patients of both groups revealed to present a medium level of well-being and of global ill-being (namely of muscular symptoms), but high level of nervous system symptoms and low level of respiratory and digestive symptoms.

**Conclusions** Surgical treatment seems to contribute to better well-being and to the improvement of ill-being in patients suffering from obesity. Nevertheless it will be necessary to develop longitudinal studies to confirm this impact.

# P-168 Preoperative Treatment with the Antiobesity Medication Sibutramin Improves Perioperative Outcome

**Presenter: J. Aberle (University Hospital Hamburg, Hamburg, Germany)**

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**Background** Obesity in an independent risk factor for bariatric surgery. Previous studies have shown, that a preoperative weight loss is associated with a better long term outcome, fewer complications, and less time in the operation room in bariatric patients. However preoperative weight loss is hard to achieve in many patients.

**Methods** We therefore conducted a study in which 25 bariatric patients received 15 mg of the weight loss medication sibutramine prior to laparoscopic roux-en-y gastric bypass. It was our interest to find out, if these patients had a benefit compared to a control group who did not receive medication.

**Result** Obesity in an independent risk factor for bariatric surgery. Previous studies have shown, that a preoperative weight loss is associated with a better long term outcome, fewer complications, and less time in the operation room in bariatric patients. However preoperative weight loss is hard to achieve in many patients. We therefore conducted a study in which 25 bariatric patients received 15 mg of the weight loss medication sibutramine prior to laparoscopic roux-en-y gastric bypass. It was our interest to find out, if these patients had a benefit compared to a control group who did not receive medication.

**Conclusion** Medical therapy with sibutramine in preparation for bariatric surgery can improve health status of patients and lead to a reduction of liver size and operating time. It should be considered as an alternative or addition to dietary therapy or gastric balloon treatment in preparation of patients expecting a roux-en-y gastric bypass.

# P-169 Obese Pregnant Women with Gestational Diabetes Mellitus: Fears, Anxieties and Beliefs as to Becoming Ill and Being Hospitalized

**Presenter: A. Fregonese (Irmandade da Santa Casa de Misericórdia de São Paulo, São Paulo, Brazil)**

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**Background** The so-called "high-risk pregnancy" represents an emotional and a social problem. The objective of this study was to identify the emotional questions involved in the diagnosis of gestational Diabetes Mellitus, with hospitalized pregnant women whose BMI was over 30.

**Methods** This was a retrospective study with 72 pregnant women, which made use of a semi-structured interview protocol.

**Results** The average age was 27 years. As for the gestational age, 30% were in their first quarter, 40%, in their second quarter, and 30%, in their third